

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	CO-INJECTION MIXING METHOD AND APPARATUS
Attorney Docket Number::	2511-1049
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	9
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: MAURIZIO
Middle Name::
Family Name:: CORTI
Name Suffix::
City of Residence:: SAN FERMO DELLA BATTAGLIA (CO)
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA VENETO 4
Address::
City of Mailing Address:: SAN FERMO DELLA BATTAGLIA (CO)
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 22020

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: PIERO
Middle Name::
Family Name:: CORRADI
Name Suffix::
City of Residence:: SARONNO (VA)
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA STOPPANI 18
Address::
City of Mailing Address:: SARONNO (VA)

State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 21047

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: CARLO
Middle Name::
Family Name:: FIORENTINI
Name Suffix::
City of Residence:: SARONNO (VA)
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA VOLONTERIO 21
Address::
City of Mailing Address:: SARONNO (VA)
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 21047

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP03/12222	11/3/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI2002A002336	11/5/02	Yes

Assignment Information

Assignee Name:: AFROS S.P.A.
Street of Mailing VIA G. FERRARIS 65
Address::
City of Mailing Address:: CARONNO PERTUSELLA (VA)
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 21042